Saccarappa Obedience Club Class Registration Form

Indicate the class you are registering for:	
Classes (\$100) CIRCLE ONE: Puppy Beginn	
Class Start Date://	Other:
Todays Date:	ALL INFORMATION MUST BE FILLED FOR REGISTRATION TO BE PROCESSED
Name:	
Address:	
Phone:	
Email:	
Dog's Name:	Breed:
Dog's Age: Are all shots curre	ent? YES NO
In consideration of the acceptance of my application indemnify, hold harmless, waive and release Sac agents from any and all clams by myself, member	on to train with Saccarappa Obedience Club, I hereby agree to ccarappa Obedience Club, its trainers, officers, members and ers of my family or persons accompanying me to any training o, while in the building, on the grounds or surrounding area, as
Signature of owner or authorized agent: (In case of minor, parent or legal guardian must si	Payment Options:
(in case of filliof, parent of legal guardian flust sign)	Registration must be submitted with deposit to be processed
	☐ Deposit Check is Included (\$50.00)☐ Check for the full amount is included
Name and address of owner: (if different from above)	Check for the full amount is included
	Mail registration to: S.O.C. c/o Claire Marx 421 Falmouth Road

Windham, ME 04062

Signature(s) of anyone who will help work the dog:

(In case of minor, parent or legal guardian must sign)